

# State of Arizona Department of Health Services

# **Request For Grant Application (RFGA)**

RFGA Number:	HR861037			
RFGA Due Date / Time:	Tuesday, October 2, 2007 at 3:00 P.M. Local Time			
Submittal Location:	Arizona Department of Health Services 1740 West Adams Street, Room 303 Phoenix, Arizona 85007			
Description:	Parent Education S	Services		
A Pre-Application Conference:	September 10, 2007	10:00 am	1740 W. Adams Phoenix, AZ Conf Room <b>#309</b>	
	Date	Time	Location	
In accordance with A.R.S. §41-2701 Department of Health Services, at the				
Applications must be in the actual potime and date, and at the submittal local		a Department of Health	Services, or prior to the	
Applications must be submitted in a sealed envelope or package with the RFGA Number and the Applicant's name and address clearly indicated on the envelope or package. All Applications must be completed in ink or typewritten. Additional instructions for preparing an Application are included in this RFGA.				
Persons with disabilities may request special accommodations such as interpreters, alternate formats, or assistance with physical accessibility. Requests for special accommodations must be made with 72 hours prior notice. Such requests are to be addressed to the RFGA Contact Person.				
APPLICANTS ARE STRONGLY	Y ENCOURAGED TO	CAREFULLY READ	THE ENTIRE RFGA.	
Grant Application Contact Person:				
Cynthia Daugherty Procurement Specialist (602)-542-2942		State Government Adminis	trator	
		Date		



# **GRANT APPLICATION** RFGA NO. HR861037

Arizona Department Of Health Services 1740 W. Adams, Room 303 Phoenix, Arizona 85007 (602) 542-1040 (602) 542-1741 Fax

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The Undersigned hereby applies and agrees to a written exceptions in the Application.	ll of the terms, condition	ns, specifications, a	ny amendments in the F	Request and any
Applicant's Arizona Transaction (Sales) Privilege	Tax License Number:			
Applicant's Federal Employer Identification Num	ber:			
Applicant's Name		Name of Person A	uthorized to Sign Applic	eation
Street Address		Title of Authorized	d Person	
City State Zi	p Code	Signature of Author	orized Person	Date
Telephone Number:		Facsimile Number	:	
Acknowledgement of Amendment(s): (Applicant acknowledges receipt of amendment(s) to the Request for Grant Application and related documents numbered and dated	Amendment No.	Date	Amendment No. Date	
ACCEPTANCE OI	F APPLICATIO (For State of Arizona Usa		NT AWARD	
Your Application, datedto perform based upon the RFGA and your Application	, is hereby accepted cation, as accepted by the		e Notice of Award. You	are now bound
This Grant will henceforth be referred to as Grant	Number: HR861037			
You are hereby cautioned not to commence any executed purchase order, grant release document,			e under this Grant until	you receive an
	State of Ari	zona		
Awarded this	day of		2007.	
	State Government Adm	inistrator	_	

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# What is the Arizona Department of Health Services, Bureau of Women's and Children's Health?

The Arizona Department of Health Services (ADHS), Bureau of Women's and Children's Health (BWCH) mission is to strengthen the family and the community by promoting and improving the health status of women and children. This is accomplished through the provision of community based services and the facilitation of systems development. The functional structure includes the following sections: assessment and evaluation; planning, education and partnership; community services; and business and finance. The BWCH manages and distributes funding that provides services that reduce the mortality and morbidity among women and children, increases access to health care, and reduces health disparities. For more information on the specific programs, go to <a href="https://www.azdhs.gov/phs/owch">www.azdhs.gov/phs/owch</a>.

The BWCH oversees the Adolescent Sexual Health Programs which include reproductive health/family planning services, local county health department teen pregnancy prevention projects, the comprehensive sexuality education services projects and the abstinence education program. These programs are working together toward the common goal of reducing unintended teen pregnancies and births. The Bureau of Women's and Children's Health recognizes the important role that parents, caregivers and foster parents have in educating their children regarding sexual health issues as well as other risk behaviors. Parent Education Services has been added to the Adolescent Sexual Health Programs as part of the overall initiative to reduce unintended teen pregnancies, births and sexually transmitted diseases.

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# What is the Funding Source for this Grant?

Proposition 203, The Healthy Arizona Initiative, was passed by Arizona voters on November 1995, authorizing the use of lottery funds when available to be utilized for teen pregnancy prevention programs. According to Chapter 190-421R, Section 2. Community Grants, "the Department of Health Services shall establish contracts to educate and mobilize local communities in developing culturally diverse programs and strategies that are designed to reduce the incidence of teenage sexual activity and sexually transmitted diseases among teenagers in Arizona". The funds from the lottery became available in July 2005. The Arizona Department of Health Services, Bureau of Women' and Children's Health (BWCH), Adolescent Sexual Health Programs, is charged with the implementation of these funds.

The Department of Health Services received input from stakeholders regarding the utilization of lottery funds. A plan was developed which included allocating funds to provide a parent education campaign and community based parent education services to parents, caregivers and foster parents of children and youth ages 6-18 in an effort to provide education and training on effective communication regarding sexual health issues and other risk behaviors.

# What is the Total Amount of Available Funds?

Approximately \$600,000 will be available for community based Parent Education Services projects for approximately 12 months targeting parents, caregivers and foster parents of children and youth ages 6 -18 in areas of the state which also have high rates of unintended teen pregnancies, births and sexually transmitted diseases. Additional funds may be available to extend projects over a period of time.

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# PROGRAM MISSION AND GOALS

# **Background**

Arizona continues to have high teen pregnancy and birth rates even though there have been significant decreases since 1998, following the national trend. In 2004, Arizona had the 5th highest teen birth rate in the United States for females aged 15-19 in 2004. (Source: National Vital Statistics Reports, Vol. 55, 2006). The Arizona rate was 60.1 per 1,000 females aged 15 -19 compared to the United States rate of 41.1 per 1,000 for 2004. In 2005, the birth rate among all females 15-19 years old was 56.5 per 1,000 females for Arizona. The highest rates were in La Paz, (102.4), Gila (79.6) and Yuma (74.9) counties. In 2005, 38 teens became pregnant every day in Arizona, down from 39 in 2004, but still lower than the high of 40 in 1998 (Source: Arizona Vital Statistics Report, 2005). Teens pregnant with their second or later pregnancy have represented approximately 28%-30% of all teen pregnancies for the last seven years. Teens 15-19 continue to have high rates for reported cases of gonorrhea, chlamydia and genital herpes, second only to the 20-24 year old age group. Additional health status statistics can be obtained by accessing the ADHS website at www.azdhs.gov/plan/index.htm. Recent research from the National Campaign to Prevent Teen Pregnancy (NCPTP) indicates that parents have the most influence on their teens' decisions about sexual behavior. Most teens agree that it would be much easier for them to postpone sexual activity and avoid teen pregnancy if they were able to have more open, honest conversations about sexual issues with their parents, according to the NCPTP. The Bureau of Women's and Children's Health has accepted the challenge to involve parents, caregivers and foster parents in this effort through the provision of funding for innovative community based projects.

The Adolescent Sexual Health Program supports Healthy People 2010 and facilitates achievement of the Bureau of Women's and Children's Health Strategic Plan.

# **ADHS Goals**

In an effort to reduce teen pregnancy in the state, ADHS has proposed the following goals:

Goal 1: Annually reduce the number of pregnancies by 1.5 per 1,000 teenage girls age 15-19

Goal 2: Annually reduce the number of repeat pregnancies by .5 per 1,000 teenage girls age 15-19

# What is the Goal of the Parent Education Services Program?

The Program Goal is:

To develop and implement programs for parents/caregivers/foster parents of school aged children ages 6-18 with an emphasis on providing education which includes the following topic areas: 1) development and practical application of parent/child communication skills, 2) risk and protective factors, 3) the consequences of unhealthy risk behaviors, 4) the benefits of healthy behaviors, 5) information on primary and secondary prevention of teen pregnancy and sexually transmitted diseases, 6) growth and development of children and adolescents; and 7) the exploration and discussion of parental views regarding sex, love and healthy relationships with others.

The Parent Education Services Program is not intended to promote specific approaches with providing parent education. Rather, the intention is to support parents in improving their ability to communicate their own parental views to their youth as well as enhance parental knowledge and understanding of the healthy growth and development of children and adolescents through the discussion of all of the above topic areas.

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# What will this Request for Grant Application Fund?

The funds will provide for the development and implementation of community based, multi-faceted, parent/ caregiver/ foster parent education projects that will address the problems of unintended teen pregnancies and births and sexually transmitted diseases. Projects that have been demonstrated as effective or those that have shown to have promise in the community that are consistent with research findings on strategies to involve parents in education programs as provided by the National Campaign to Prevent Teen Pregnancy and the Annie B. Casey Foundation are recommended.

Grantees may utilize methods that are appropriate for the demographics and particular characteristics of their community to achieve program standards and outcomes. Within the framework of the education program is the flexibility for contractors to implement the program in a manner that "fits" their neighborhood or community. The program works to assure that differences in culture, family structure, personal and family resources are respected among communities throughout the state.

Grantee shall provide one or more of the following prevention strategies:

- (A) Curricula based parent/caregiver/foster parent education programs in a community based setting. The following topic areas need to be included in the instruction: 1) development of parent/child communication skills 2) risk and protective factors; 3) the consequences of unhealthy risk behaviors; 4) the benefits of healthy behaviors; 5) information on primary and secondary prevention of teen pregnancy and sexually transmitted diseases, 6) growth and development of children and adolescents; and 7) the exploration and discussion of parental views regarding sex, love and healthy relationships with others. Parent programs may also involve sessions where youth are present to encourage parent/child communication skills. Preference will be given to those projects that will provide a minimum of 4 hours of parent education. Longer on-going program education is encouraged. Utilization of pre and post surveys to measure program effectiveness is highly encouraged.
- (B) Training of Trainers Parent Partners programs for parents/caregivers/foster parents in a community based setting. Parents/caregivers will be educated and trained utilizing an approved curriculum which will enable them to provide the education to other parents/caregivers in their community. The following topic areas need to be included in the instruction: 1) development of parent/child communication skills 2) risk and protective factors; 3) the consequences of unhealthy risk behaviors; 4) the benefits of healthy behaviors; 5) information on primary and secondary prevention of teen pregnancy and sexually transmitted diseases; 6) growth and development of children and adolescents; and 7) the exploration and discussion of parental views regarding sex, love and healthy relationships with others. A unit on group facilitation and how to conduct community outreach will also be included. Utilization of pre and post surveys to measure program effectiveness is highly encouraged.
- (C) Community workshops or conferences specifically designed to reach parents/caregivers/foster parents, teachers and youth workers which would provide education and training utilizing local or national speakers on the following topic areas: 1) development of parent/child communication skills; 2) risk and protective factors; 3) the consequences of unhealthy risk behaviors; 4) the benefits of healthy behaviors; 5) information on primary and secondary prevention of teen pregnancy and sexually transmitted diseases; 6) growth and development of children and adolescents; and 7) the exploration and discussion of parental views regarding sex, love and healthy relationships with others.

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# What Educational Materials can be utilized?

The National Campaign to Prevent Teen Pregnancy and the Annie B. Casey Foundation are a few sources for examples of parent education materials. These and other sources are listed on Exhibit 1, Other Resources.

Educational materials will be considered on a case-by-case basis for parents/caregivers and must be submitted with the application with the primary instructional materials planned, including any handouts, DVD's or CD-ROM's. Once materials are reviewed and accepted, any additional changes or modifications made to the educational materials must be reviewed and approved by ADHS prior to use. Proposed adaptations to any materials must be provided. This grant will not fund the development of a new parent curriculum.

Other criteria listed on the checklist provided also on Exhibit 1, will be utilized to evaluate the project and chosen educational materials.

# What is the Parent Education Services Evaluation Process?

The individual grantee evaluation piece of the logic model (**refer to Attachment 4**) will be required and is separate from any evaluation that may be funded directly by ADHS. Grantee will adhere to the ADHS monthly and annual reporting requirements as part of the program evaluation process.

# Who is Eligible to Apply for this Funding Opportunity?

Private, non-profit (classified as 501C by the Internal Revenue Service), faith-based and public agencies are eligible to apply.

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# **How will the Applications be Evaluated?**

Grant Applications will be evaluated according to the Grant requirements per A. R. S. § 41-2702 F. The criteria are listed in the relative order of importance and are based on the following:

- Narrative executive summary and the scope/logic model, tasks to perform and complete the work
- One or more strategies addressed to provide parent education programs to help prevent teen pregnancy and sexually transmitted diseases
- Experience/expertise/reliability and qualifications based on background, history, track record, organization chart, financial statement, staff resumes, and letters of reference, and letters of support
- Ability to perform services as reflected by availability and suitability of staff resources
- Collaboration as demonstrated with memorandums of understanding, sub-contracts and letters from collaborative agencies describing support of the proposed partnership
- Itemized budget, budget justification and price sheet showing proposed cost (s) including other sources of funds
- Conformance to all other RFGA requirements and conditions

# **INSTRUCTIONS**

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# What Else Do I Need Know to Submit a Grant Application?

### 1. Pre-Application Conference:

Prospective applicants are invited to attend a pre-application conference. Attendance is not required. The date, time and location of this conference are indicated on the cover page. This conference will be to clarify the contents of this request for grant applications in order to prevent any misunderstanding of the Department's position. Any doubt as to the requirements of this request for applications or any apparent omission or discrepancy should be presented to the Department at this conference. The Department will then determine the appropriate action necessary, if any and may issue a written amendment to the request for grant applications. Oral statements or instructions shall not constitute an amendment to this request for applications.

# 2. Application Opening:

Applications shall be opened publicly at the time and place designated on the cover page of this document. The name of each Applicant shall be read at this time. After Grant award, the applications and evaluation documents shall be open for public inspections.

#### 3. Written Questions:

Submit any questions about the RFGA needing clarification, in writing, not later than seven (7) working days prior to the RFGA due date to:

Arizona Department of Health Services Attn: Cynthia Daugherty, Procurement Specialist 1740 West Adams, Room 303 Phoenix, Arizona 85007 Phone No. (602) 542-2942 Fax No. (602) 542-1741

E-mail address: daughec@azdhs.gov

# 4. Confidential Information:

If an applicant believes that their application contains information that should be withheld, a statement advising the procurement officer of this fact and explaining the reasons for confidentiality shall accompany the submission, and the information shall be so identified wherever it appears. The person shall stamp or specifically identify all information the people believe remains confidential. The information identified by the person as confidential shall not be disclosed until the director makes a written determination. The director shall review the statement and information and shall determine in writing whether the information shall be withheld. If the director determines to disclose the information, the director shall inform the person in writing of such determination.

#### 5. Oral or Written Presentations:

The Department reserves the option to allow applicants to make oral or written presentations regarding the scope of work, terms and conditions of the grant, budget and other relevant matters set forth in the request for grant applications. The purpose of this is to provide clarification and to assure full understanding and responsiveness to the application requirements regarding the grant.

#### 6. Multiple Awards:

In order to assure that any ensuing grants will allow the State to fulfill current and future needs, ADHS reserves the right to award grants to multiple applicants.

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### 7. Application Acceptance Period:

Application cost estimates must be held open until grant award.

#### 8. Authorized Signature:

- A. For any document that requires the Applicant's signature, the signature provided must be that of the Owner, Partner or Corporate Officer duly authorized to sign Grant agreements. Additionally, if requested by ADHS disclosure of ownership information shall be submitted.
  - (1) Privately Owned: The Owner must sign the grant application.
  - (2) Partnership: A Partner must sign the grant application.
  - (3) Corporation: A duly authorized Corporate Officer must sign the grant application.
- B. If a person other than these specified individuals signs the grant application, a Power of Attorney indicating the employee's authority must accompany the grant application. All addenda to the grant application shall be signed by the authorized individual who signed the grant application except that they may be signed by a duly authorized designee.

# How Do I Apply for a Grant?

- 1. Read and familiarize yourself with all sections of this RFGA.
- 2. Definition of Terms Used in this RFGA.
  - A. "Activities" are day-to-day and periodic things that are accomplished to meet the goal(s). They are usually single-faceted, simply stated and numerous.
  - B. "ADHS" means the Arizona Department of Health Services.
  - C. "Department" means the Arizona Department of Health Services.
  - D. "Attachment" means a document that may or may not be included as part of the Grant Application.
  - E. "Exhibit" means a document included only for information purposes. It is not intended to be submitted as part of the Grant Application.
  - F. "Key Personnel" means staff involved in the planning, administration, operation or monitoring of this Grant.
  - G. "Primary Prevention" means population-based and/or environmental and system-level strategies, policies, and actions that prevent pre-teen and teen sexual activity and teen pregnancy from occurring. Such prevention efforts work to modify and/or reduce the events, conditions, situations, or exposure to risk factors that are associated with teen pregnancy.
  - H. "Secondary Prevention" means population-based and/or environmental and system-level strategies, policies, and actions that reduce the risk of unintended teen pregnancy and sexually transmitted diseases, including HIV/AIDS.
  - I. "Sexual Activity" means any type of genital contact or sexual stimulation including, but not limited to vaginal, oral, or anal intercourse or mutual masturbation.
  - J. "**Medically Accurate**" means supported by research, recognized as accurate and objective by leading medical, psychological, psychiatric, and public health organizations and agencies, and where relevant, published in peer –reviewed journals.

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- K. **"Shall or Must"** indicates a mandatory requirement. Failure to meet these mandatory requirements may result in the rejection of an application as non-responsive.
- 3. Required Application Information. The following shall be submitted:

One (1) original and three (3) copies of each application shall be submitted on the forms and in the format specified in the RFGA. The responses shall be typed using a 12 point font and single spaced. The original copy of the application should be clearly labeled "ORIGINAL". The three copies shall be submitted stapled or clipped and marked as copy. The material should be in sequence and related to the RFGA. The Department will not provide any reimbursement for the cost of developing or presenting applications in response to this RFGA. Failure to include the requested information may have a negative impact on the evaluation of the applicant's application. The original application and all copies shall have a table of contents, tabs for each section and page numbers. If necessary the page numbers can be handwritten on the attachment pages. The original, ink signed application shall be provided in a 1 inch, 3 ring binder labeled with Applicant's name and project title, with tabs for each section. All pages shall be sequentially numbered and material shall be in the following sequence and related to the RFGA:

- a. Table of Contents for entire application with page numbers
- b. Signed Application and Award Document
- c. Terms and Conditions (one set with the original application only).
- d. Written responses to Task Methodologies A-G
- e. Contact Information, completed page 20
- f. Attachment 1- Completed Budget Development Worksheet and Narrative
- g. Attachment 2 Completed Implementation Plan
- h. Attachment 3 Completed Logic Model Matrix
- i. Attachment 4 Completed Past Experiences (provide two (2) references)
- j. Attachment 5 Completed Applicant's Experience Key Personnel
- k. Attachment 6 Completed List of Other Funding Sources
- I. Attachment 7 Completed Price Sheet
- m. Other Attachments: As applicable-for example copies of sub-contracts, examples of applicants program materials, letters of support from schools, community partners, copies of curriculum/materials (parent).
- **4.** Submit your completed application on or before 3:00 p.m. at the time and place designated on the cover page of this document.
- 5. Applications shall be opened publicly at the time and place designated on the cover page of this document. The name of each applicant shall be read publicly and recorded.
- **6.** Because funds are limited, it may be necessary to make changes to the applications. The State of Arizona reserves the right to award grants for less than the proposed amount.
- 7. Keep a copy of this grant application and your grant response. If awarded, the Contractor shall be Bound to the services listed by the grant application and all terms, conditions, specifications, and amendments included in the application.

### **TERMS AND CONDITIONS**

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- 1. **Grant Term.** The initial term of this Grant shall commence on the date that the ADHS State Government Administrator signs the Application and Acceptance form and will remain in effect through June 30, 2008, unless terminated, canceled, or extended as otherwise provided herein.
- 2. Option to Renew Grant. This Grant shall not bind nor purport to bind ADHS and the Grantee for any grant commitment in excess of the original grant term. The parties shall have the right to renew the Grant, in one-year increments, not to exceed a total grant term of five years. If such rights are exercised, all terms, conditions and provisions of the original Grant shall remain the same and apply during the option terms.
- 3. Grant Type: Cost Reimbursement.
- 4. Grant Amendments. Any change in this Grant, including the Scope of Work, shall only be accomplished by a formal, written grant amendment, signed by the ADHS State Government Administrator. Any such amendment shall be within the scope of the grant and shall specify the change, such as, any increase or decrease in Grant amount and the effective date of the change. The Grantee expressly and explicitly understands and agrees that no other method and/or no other document, including correspondence, acts and oral communications by or from any person, shall be used or construed as an amendment to this Grant.
- 5. Suspension or Debarment Status. If the firm, business or person submitting this Application has been debarred, suspended or otherwise lawfully precluded from participating in any public procurement activity, including being disapproved as a Grantee with any Federal, State or local government or if any such preclusion from participation from any public procurement activity is currently pending, the Applicant shall fully explain the circumstances relating to the preclusion or proposed preclusion in the Application. The Applicant shall include a letter with its Application setting forth the name and address of the governmental unit, the effective date of this suspension or debarment, the duration of the suspension or debarment, and the relevant circumstances relating to the suspension or debarment. If suspension or debarment is currently pending, a detailed description of all relevant circumstances including the details enumerated above shall be provided. The Application of an Applicant who is currently debarred, suspended or otherwise lawfully prohibited from any public procurement activity shall be rejected.
- **6. Availability of Funds for the Next Fiscal Year.** Funds may not presently be available for performance under this Grant beyond the current fiscal year. No legal liability on the part of the State for any payment may arise under this Grant beyond the current fiscal year until funds are made available for performance of this Grant. The State shall make reasonable efforts to secure such funds.
- **7. Audit.** Pursuant to A.R.S. §35-214, at any time during the term of this Grant and five years thereafter, the Grantee's or any subcontractor's books and records shall be subject to audit by the State and, where applicable, the Federal Government, to the extent that the books and records relate to the performance of the Grant.
- 8. Information Disclosure: The Grantee shall establish and maintain procedures and controls that are acceptable to the State for the purpose of assuring that no information contained in its records or obtained from the State or from others in carrying out its functions under the Grant shall be used or disclosed by it, its agents, officers, or employees, except as required to efficiently perform duties under the Grant. Persons requesting such information should be referred to the State. The Grantee also agrees that any information pertaining to individual persons shall not be divulged other than to employees or officers of Grantee as needed for the performance of duties under the Grant, unless otherwise agreed to in writing by the State.
- 9. Commencement of Work. All work to be performed under this grant must commence within 90 days of award.
- 10. Key Personnel. It is essential that the Grantee provide an adequate staff of experienced personnel, capable of and devoted to the successful accomplishment of work performed under this Grant. The Grantee must assign specific individuals to key positions of responsibility (as identified on Attachment 5). Once assigned to work under this Grant, key personnel shall not be removed or replaced without prior express approval by the ADHS State Government Administrator.

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- 11. Accounting Requirements. All financial records shall be maintained and expenditures made in accordance with the Generally Accepted Accounting Principles to permit accurate tracking of funds to a level of expenditure adequate to ensure proper use of funds.
- 12. Financial Management: For all Grants, the practices, procedures, and standards specified in and required by the Accounting and Auditing Procedures Manual for Arizona Department of Health Services funded programs shall be used by the Grantee in the management of Grant funds and by the Department when performing a Grant audit. Funds collected by the Grantee in the form of fees, donations and/or charges for the delivery of these Grant services shall be accounted for in a separate fund.

<u>State Funding</u>. Grantees receiving federal funds under this contract shall comply with the certified Compliance provisions of A.R.S. §35-181.03.

<u>Federal Funding</u>. Grantees receiving federal funds under this contract shall comply with the certified finance and compliance audit provision of the Office of Management and Budget (OMB) Circular A-133, if applicable. The federal financial assistance information shall be stated in a Change Order or Purchase Order.

- **Sub Contracts:** The Grantee shall not enter into any Subcontract under this Grant for the performance of this Grant without the advanced written approval of the ADHS Program Manager and ADHS State Government Administrator. The Grantee shall clearly list any proposed subcontractors and the subcontractor's proposed responsibilities. The Subcontract shall incorporate by reference the terms and conditions of this Grant.
- **14. Licenses.** Grantee shall maintain, in current status, all Federal, State and local licenses and permits required for the operation of the business conducted by the Grantee.
- **Purchase Orders:** The Grantee shall, in accordance with all terms and conditions of the Grant, fully perform and shall be obligated to comply with all Purchase Orders received by the Grantee prior to the expiration or termination hereof, unless otherwise directed in writing by the ADHS State Government Administrator, including, without limitation, all Purchase Orders received prior to but not fully performed and satisfied at the expiration or termination of this Grant.
- **16. Financial Requirements:** Grantees receiving federal funds under this grant shall comply with the certified finance and compliance audit provisions of the Office of Management and Budget (OMB) Circular A-133, if applicable. Grantees receiving state funds under this grant shall comply with the certified compliance provisions of A.R.S. 35-181.03.
- **17. Federal Procurement Suspension/Debarment:** All applicants upon submittal and signature of their application hereby attest and certify that the company has not been debarred or suspended from federal procurements.
- 18. HIPAA Requirements: The Grantee warrants that it is familiar with the requirements of HIPAA and HIPAA's accompanying regulations and will comply with all applicable HIPAA requirements in the course of this contract. Grantee warrants that it will cooperate with the Arizona Department of Health Services (ADHS) in the course of performance of the contract so that both the ADHS and Grantee will be in compliance with HIPAA, including cooperation and coordination with the ADHS Privacy Officer and other compliance officials required by HIPAA and its regulations. Grantee will sign any documents that are reasonably necessary to keep the ADHS and Grantee in compliance with HIPAA, including, but not limited to, business associate agreements. If requested by the ADHS, Grantee agrees to sign the "Arizona Department of Health Services Pledge To Protect Confidential Information" and to abide by the statements addressing the creation, use and disclosure of confidential information, including information designated as protected health information and all other confidential or sensitive information as defined in policy. In addition, if requested, Grantee agrees to attend or participate in HIPAA training offered by the ADHS or to provide written verification that the Grantee has attended or participated in job related HIPAA training that is: (1) intended to make the Grantee proficient in HIPAA for purposes of performing the services required and (2) presented by a HIPAA Privacy Officer or other person or program knowledgeable and experienced in HIPAA and who has been approved by the ADHS HIPAA Compliance Officer.

# **TERMS AND CONDITIONS**

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#### 19. Grant Restrictions:

- a. Applicants may not use more than 10% of the amount received each year for administering the grant.
- b. Applicants that are also recipients of any related State or Federal Program funding sexuality education, abstinence education, youth development education services including life skills education, marriage education or other primary prevention related programs such as drug or alcohol prevention which also provide parent education need to submit a joint budget for those programs, which clearly delineates the project activities, personnel names, FTE's and costs that are proposed under the Parent Education Services grant program from those supported under the other state and/or federal grant education programs.
- c. Applicants may not expend state funds for sectarian instruction, worship, prayer or proselytization.
- d. Applicants will provide a copy of all printed or broadcast media or any other educational materials, evaluation results and reports and/or promotional items developed and purchased using funds awarded under this grant to the Arizona Department of Health Services Program Manager for approval prior to use or dissemination. Media and/or printed educational materials will adhere to the required wording as follows: "Supported in part by the Parent Education Services Grant Program as made available through the Arizona Department of Health Services." Promotional items will adhere to the required wording as follows" "Talk to Your Kids" or "Parents Matter" or other wording as provided or approved by ADHS.
- e. Proposed local and/or national speakers /trainers paid for using funds awarded under this grant must receive prior approval from the Arizona Department of Health Services.
- **20. Arizona Substitute/IRS W-9 Form:** In order to receive payment the Grantee shall have a current Arizona Substitute W-9 Form on file with the State of Arizona, unless not required by law.
- 21. Payment: The Grantee shall submit to ADHS, a monthly statement of charges in a form provided and known as Exhibit 7, Contractor's Expenditure Report (CER) for the work completed under an approved project manager in conformance with the price sheet/fee schedule of this contract.
- 22. Offshore Performance of Work Prohibited: Due to security and identity protection concerns, direct services under this Contract shall be performed within the borders of the United States. Any services that are described in the Specifications or Scope of Work that directly serve the State of Arizona or its clients and may involve access to secure or sensitive data or personal client data or development or modification of software for the State shall be performed within the borders of the United States. Unless specifically stated otherwise in the specifications, this definition does not apply to indirect or "overhead" services, redundant back-up services or services that are incidental to the performance of the contract. This provision applies to work performed by subcontractors at all tiers. Grantees shall declare all anticipated offshore services in the Grant Application.

#### 23. Federal Immigration Laws, Compliance By State Contractors:

By entering into the Contract, the Contractor warrants compliance with the Federal Immigration and Nationality Act (FINA) and all other Federal immigration laws and regulations related to the immigration status of its employees. The Contractor shall obtain statements from its subcontractors certifying compliance and shall furnish the statements to the Procurement Officer upon request. These warranties shall remain in effect through the term of the Contract. The Contractor and its subcontractors shall also maintain Employment Eligibility Verification forms (I-9) as required by the U.S. Department of Labor's Immigration and Control Act, for all employees performing work under the Contract. I-9 forms are available for download at USCIS.GOV

The State may request verification of compliance for any Contractor or subcontractor performing work under the Contract. Should the State suspect or find that the Contractor or any of its subcontractors are not in compliance, the State may pursue any and all remedies allowed by law, including, but not limited to: suspension of work, termination of the Contract for default, and suspension and/or debarment of the Contractor. All costs necessary to verify compliance are the responsibility of the Contractor.

**24. Arbitration:** The parties to this Grant agree to resolve all disputes arising out of or relating to this Grant through arbitration, to the extent required by A.R.S. 12-1218.

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#### PARENT EDUCATION SERVICES

#### 1. BACKGROUND:

# The Logic Model:

The Bureau of Women and Children's Health (BWCH) has incorporated the Arizona Program Design and Evaluation Logic Model (hereafter known as the Logic Model) into its Request for Grant Applications process. The Logic Model was developed by the former Governor's Community Policy Office in collaboration with other state agencies for the purpose of creating a standardized, consistent approach to making grants that identifies and describes a sequence of tasks needed to solicit, apply for, and award grants.

The Logic Model emphasizes the interrelationships of designing, implementing and evaluating programs. The applicant will be asked to show these linkages throughout their application. The Logic Model is a useful planning tool that will assure that the proposed program addresses the identified problem of the target population. The tasks outlined in A –G detail the sequential questions and steps required in order to complete the Logic Model. Re-type each item and then provide a written response to A-G. Note: First complete Tasks A –G, then transfer the relevant information into the Logic Model Matrix form to facilitate completion of the Logic Model Matrix (Attachment 4). The completed Logic Model Matrix is a concise summary of the outlined tasks.

NOTE: The Logic Model Attachments can be found in Microsoft Word .doc format on the following website:

#### http://www.azdhs.gov/procurement/grants.htm

**2. TASKS**: Submit a written response to each of the following Logic Model Tasks. (Retype each item and then provide the response.)

### A. **EXECUTIVE SUMMARY:** (not to exceed 2 pages, excluding attachments)

Submit a written Executive Summary, which is a brief summary of the plan for the provision of services as stated in the Logic Model and the amount of funds requested under the grant. Attach the completed Logic Model Matrix (Attachment 4).

#### **B. NEEDS/RESOURCES:** (not to exceed 4 pages, excluding attachments)

This section creates a foundation for the application by focusing on problem identification, the individuals or groups to be reached, other people or groups who will play a role in the development or implementation of the program, the relevant risk and protective factors/assets, the gathering and analysis of data that will establish the needs to support the identified problem, and the identification of other resources currently directed toward the identified problem.

- 1. State the problem addressed in this application.
- 2. Based on the stated problem, what group(s) of people or communities will the application be targeting?
- 3. Identify the external team. What other individuals or organizations (key stakeholders who have a vested interest in the stated problem) are involved in the development and/or implementation of the application and what are their specific roles?
- 4. Identify the internal team. Who are the individuals within the applicant's organization involved in the development and implementation of the application and what are their specific roles? It will be particularly important to show there will be continuity of staff as the application moves from development to the implementation.
- 5. Select risk factors (those that make an individual more likely to become involved in negative behavior or situation) and/or protective factors (those that help individuals resist negative behavior or situation) that are the most relevant to the stated problem and the target population. If you prefer, this response may be written in terms of "assets to be strengthened." Factors should be related to prediction of early sexual debut, and/or continued sexual activity.
- 6. Provide detailed information, including local data (e.g. statistics, surveys, focus groups), that has been collected that validate the identified problem(s) in the community to be served.

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- 7. What are the sources of this data?
- 8. How was this data collected?
- 9. How does the data relate to and validate the identified problem? Utilize the data to describe the nature and extent of the problem as it relates to the target population/area.
- 10. What other resources (federal, state, or local funds plus any in-kind resources) in your community are currently being directed toward the stated problem?
- 11. Will the application support or enhance those efforts? Provide explanation of how.
- 12. Describe the applicant's/collaboration's ability to meet the identified needs and give examples of experience in implementing related programs and the outcomes of those programs.

# C. GOALS AND OUTCOME OBJECTIVES: (not to exceed 3 pages)

This section captures the broad statements of intent (goals) and the measurable, time-specific outcomes (objectives) that will address the identified problem/needs. Goals are general and should reflect what changes are desired within your targeted population or area. Objectives should support the goals, should describe specific changes that will be accomplished within a certain period of time and are able to be measured. It is critical that the goals and objectives are realistic in terms of both time and available resources. Therefore, it may be necessary to develop intermediate or short-term objectives. It is important that the goals and objectives be stated or otherwise explained in ways that <a href="DIRECTLY LINK">DIRECTLY LINK</a> them to the identified problem/needs and the selected risk and protective factors/assets.

The initial contract time period to be reflected in the goals and objectives will be approximately November 1, 2007 through June 30, 2008. If the Grant award is extended beyond June 30, 2008, the logic model and price sheet/fee schedule shall be reviewed, updated and negotiated with the ADHS Program Manager to support the performance plan for the next annual Grant term. Thereafter, the performance plan update will be negotiated with the ADHS Program Manager on an annual basis.

- 1. State the goal(s) that will address the identified problem/need.
- 2. For each goal, identify an objective(s) that:
  - a. Describes what change will be expected in the targeted population/area (e.g. increase in knowledge regarding sexuality, increase in intentions to abstain/delay sexual activity, behavior/attitudes, decrease in risk or increase in protective factors, impact on indicators/statistics provided, etc.);
  - b. Quantifies how much will change (e.g. increase or decrease in numbers, percentages, etc.);
  - c. Gives a specific date by which the change(s) will occur.
  - d. Shall be measurable and achievable.
- 3. Explain how the goals and objectives are linked to the identified problem/needs and the selected risk and/or protective factors.

### **D. STRATEGIES/APPROACHES:** (not to exceed 5 pages, excluding attachments)

This section identifies and describes the interventions chosen to reach the stated goals and outcome objectives. These strategies and approaches can be total programs that have already been proven effective in addressing the identified problem/needs, they can be adaptations or strategies selected from effective programs, or they can be programs the applicant has created. If an original or adapted program is chosen, be sure the components of the program are backed up by science-based theory related to the particular problem/need and target population/area being addressed.

- 1. Describe the strategies/approaches (program) that will be used to meet the goals and objectives. Provide the strategy/approach for each grade level or age group of youth/parents/adults targeted including a list/description of the appropriate curriculum that will be taught for each level.
- 2. Explain how the selected strategies/approaches fit with the problem/need and will lead to achieving the stated goals and objectives.
- 3. Describe the extent to which the community is ready to improve current conditions and implement the selected strategies/approaches. Provide memorandums of understanding, letters of support, subcontracts and letters of collaboration with/from local community agencies, schools or other entities.

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- 4. Identify the science-based theory and best practices program(s) or community based promising programs that support the strategies/approaches and explain how they apply to the targeted population/area. Provide any program evaluation data that support strategies/approaches for targeted population/area.
- 5. If adapting a proven program, explain what the adaptations are and why they are being made.
- 6. Describe how the program is different from services already being provided by your organization.
- 7. How do the strategies/approaches connect to the selected risk and protective factors/assets?
- 8. Describe the characteristics of the targeted population and explain, as needed, how the strategies/approaches are culturally competent, age appropriate and gender responsive.
- **E. IMPLEMENTATION PLAN/ORGANIZATIONAL CAPACITY:** (not to exceed 5 pages, excluding attachments)

This section focuses on the steps that must be taken and the organizational capacity needed to put the strategies/approaches into action. It should include all the elements that will be required to operationalize the strategies/approaches for the duration of the grant.

#### Implementation/Work Plan Activities

- 1. Sequentially list the activities needed to implement the strategies/approaches including timelines and responsibilities. (See Exhibit 2 sample Implementation Plan).
- 2. Describe the plan for recruitment and outreach of participants/clients.
- 3. How many individuals will the program serve?
- Describe any anticipated barriers to participation and/or completion and your plans to overcome those barriers.
- 5. Describe any training that will be needed for existing and/or new staff.
- 6. How, when and by whom will this training be delivered?
- 7. Develop a set of process objectives that will be used to measure the effectiveness of the implementation (e.g. number of participants attending/completing, participant satisfaction, adequacy of resources, timely completion of activities. Additional examples of process objectives may be given). Include at least one process objective for each outcome objective.
- F. PROGRAMMATIC EVALUATION PLAN (not to exceed 3 pages, excluding attachments).

This section is designed to answer questions about whether or not the program is working and what can be done to make the program more effective. The evaluation should be directly connected to both the process objectives included in the Implementation Plan module and the outcome objectives stated in the second module, Goals and Outcome Objectives. The process/formative evaluation should measure program fidelity by assessing which activities were implemented and the quality, strengths and weaknesses of the implementation. The outcomes/substantive evaluation should determine the extent to which the program has accomplished the stated goals and outcome objectives.

#### **Process Evaluation**

- 1. Who will have overall responsibility for the process and outcome evaluations?
- 2. What resources (e.g. personnel, supplies etc.) will be needed to evaluate the program? The funds dedicated to evaluation shall be reflected in the budget. Provide copies (if applicable) of consultant subcontracts including resumes and description of past work.
- 3. How will each process objective be measured (e.g. attendance sheets, adequacy of materials and resources, participant satisfaction surveys)?
- 4. Describe the plan for evaluating the process objectives including timelines for collecting and analyzing data. Who will have overall responsibility for the process evaluation?
- 5. What data will be used? How will this data be collected and who will collect it? How will this data be organized once it has been collected? What procedures will be put in place to assure the quality of the data (e.g. training for data collectors, data collection forms, timeliness in administering tools)?
- 6. How will this data be analyzed?

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### **Outcomes Evaluation**

- The outcomes evaluation design/methodology must include a valid, reliable assessment tool. Include a sample of the evaluation tool(s) (e.g. pre/post surveys) that will be used to measure each of the outcome objectives.
- 2. Describe the plan for evaluating the outcome objectives including timelines for collecting and analyzing data? Who will have overall responsibility for the outcomes evaluation? Provide copies of consultant subcontracts including resumes and description of past work, if applicable.
- 3. What data will be used? How will this data be collected and who will collect it? How will this data be organized once it has been collected? What procedures will be put in place to assure the quality of the data (e.g. training for data collectors, data collection forms, timeliness in administering tools)?
- 4. How will this data be analyzed?
- 5. Describe how the results of your outcome evaluation will be used to continuously improve the quality of the program throughout the duration of this grant.
- **G. RESOURCES AND BUDGET:** (Not to exceed 4 pages, excluding attachments)
- 1. Complete Attachment 1 Budget Development Guidelines and Worksheet.
  - You must use this format. List all resources that will be needed to implement the strategies/approaches. These resources may be financial as well as involve curriculum, supplies, space, and equipment. Provide a very descriptive narrative justification for each expense category. Explain where these resources will be obtained including existing resources, other grants, donations and contributions, both financial and inkind.
- 2. Complete **Attachment 7 -** List of other sources of funding that your agency receives that provide services that are similar and /or complementary to the proposed project.
- 3. Complete **Attachment 8** Price Sheet. Provide budgetary categories that will be used in accordance with the Budget Development Guidelines and Worksheet.

#### 3. STATE PROVIDED ITEMS:

Link to information on characteristics of effective programs and curricula:

- a. The National Campaign to Prevent Teen Pregnancy What Works and "Terms of Engagement: How to Involve Parents in Programs to Prevent Teen Pregnancy", at: <a href="https://www.teenpregnancy.org">www.teenpregnancy.org</a>
- b. Arizona Program Design and Evaluation Logic Model: <a href="http://www.governor.state.az.us/cyf/logic model/index logicmodel.html">http://www.governor.state.az.us/cyf/logic model/index logicmodel.html</a>
- c. Exhibit 1 List of Other Resources and Materials Check List
- d. Link to OWCH Strategic Plan: www.azdhs.gov/phs/owch/publications
- e. Link to Healthy People 2010 Plan: www.azdhs.gov/phs/healthyaz2010/
- f. ADHS forms that may be necessary for program

### 4. APPROVAL:

- a. The monthly Contractor's Expenditure Report (CER) invoice and program attendance sheets shall be approved by ADHS prior to reimbursement.
- b. The Monthly Narrative and Data Report to include activities performed as related to the Logic Model and Price Sheet including each of the specified tasks, a monthly report of services completed and numbers enrolled in services being provided on the forms required by ADHS attached as Exhibits 3 and 4, as well as problems encountered and potential solutions shall be approved by ADHS prior to reimbursement.
- c. Changes or updates to the Logic Model content are allowable with approval from ADHS.
- d. The Annual Narrative and Evaluation Report based on findings from the Logic Model that includes unduplicated participant numbers and cumulative year to date data of services provided on the forms required by ADHS attached as Exhibits 3-6, shall be approved by ADHS.
- e. Prior to the grantor publishing or recording any marketing materials or items (brochures, posters, public service announcements, videos, speakers, incentive items), or publishing results from evaluation reports, which will be paid for with the funds from this grant award, a draft of the materials, items, or reports must first be approved by ADHS. This approval must be made by the ADHS Public Information Officer or other ADHS

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staff as appropriate, prior to the dissemination of such materials or reports, or airing/placement of such announcements.

#### 5. **DELIVERABLES:**

The Contractor shall submit:

- The name, phone numbers and resumes of program staff, if replaced, due within 30 days of hire. a.
- b. A monthly narrative report of program activity, including cumulative data of services rendered by participant, by site and group services, due 15 days following the month of service.
- A monthly Contractor's Expenditure Report (CER) due 15 days following each month of service. c.
- Budget and/or expenditure documentation related to monthly invoices shall be submitted to the program d. manager if requested.
- An annual report which will include any evaluation data and analysis on program reporting forms due e. November 1, 31 days following the project period.
- The revised Logic Model that will be implemented during the next contract period shall be submitted prior f. to October 1, of each year.

#### NOTICES, CORRESPONDENCE, REPORTS AND INVOICES: 6.

Notices, Correspondence, Reports and Invoices from the Grantee to the ADHS shall be sent to: a.

Program Manager/Arizona Department of Health Services Bureau of Women's and Children's Health 150 North 18<sup>th</sup> Avenue, Suite 320

Phoenix, AZ 85007

Telephone: 602-364-1400 Facsimile: 602-364-1496 E-Mail: rumanns@azdhs.gov

b. Notices, Correspondence, Reports and Payments from the ADHS to the Grantee shall be sent to: Organization:

Attention: Street Address: City, State and Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

# **PRICE SHEET**

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# **PRICE SHEET**

COST REIMBURSEMENT LINE ITEMS	AMOUNT
PERSONNEL	\$
ERE	\$
PROFESSIONAL/OUTSIDE SERVICES	\$
TRAVEL EXPENSES	\$
OCCUPANCY	\$
OPERATING EXPENSES	\$
CAPITAL OUTLAY EXPENSES	\$
OTHER EXPENSES	\$
TOTAL	\$

Applicant to enter amount requested from the Budget Development Guidelines and Form in the appropriate spaces above.

**Note**: With prior written ADHS Program Manager Approval, the Grantee is authorized to transfer among line items up to 10% of the total budget amount as shown on the Price Sheet/Fee Schedule. Any proposed transfer of funds among line items that exceeds 10% of the budget amount shall require an amendment to the grant. Transfer of funds from a funded line to a non-funded line is not allowed without an amendment.

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#### **BUDGET DEVELOPMENT GUIDELINES & WORKSHEET**

Specific types of Provider costs are to be grouped into six budget categories. Within the total cost for each budget category, a series of line item costs are to be identified. All budgeted amounts are to be rounded to the nearest dollar in each line item and budget category. It is essential that category costs be comprised of the same item costs as specified in these Guidelines.

#### 1. PERSONNEL SERVICES

- a. Compensation for personnel services is an allowable expense for Provider employees whose work is necessary for the provision of contract services.
- b. Salaries to be charged to the service must relate directly to work on the service. Salaries of employees involved in work on non-contract services must be properly apportioned and later supported by appropriate time distribution records or any other acceptable method.
- c. Benefits such as vacation, sick and administrative leave, holidays and routine training participation time are to be included in the amount budgeted for an employee's salary. In addition, any salary increases due an employee during the contract period must be included in the budgeted salary costs.

# 2. EMPLOYEE RELATED EXPENSES (ERE)

- a. Employee related expenses (fringe benefits) are allowances and services offered by the Provider agency to its employees as compensation in addition to regular salaries. Fringe benefits must be applied only to that portion of an employee's salary or wages attributable to the service. Fringe benefits budgeted in the contract must be earned during the contract period. Benefits accrued prior to the contract, but not yet paid out, are not expenses allowed by the Department.
- b. Fringe benefits include, but are not limited to Social Security (FICA), Unemployment Insurance, Worker's Compensation, health and life insurance, and retirement. The portion of the cost of these benefits paid by the employee is not an expense of the Provider agency. The employer's cost of these benefits is an eligible Provider agency expense.

#### 3. PROFESSIONAL AND OUTSIDE SERVICES

- a. Professional and consultant services, rendered by individuals or organizations, are allowable expenses if the services are directly related and essential to the contract service(s). The normal types of professional or outside services which may be placed in this budget category are those which relate to the legal, accounting, management, training/education, medical, social service and psychological professions.
- b. A written specification, of each of the consultant services to be performed, is to be available for the purpose of budget estimating and subsequent audits. The specifications normally will include estimates by item, all consultant costs such as travel, supplies, meetings or any directly related costs of the consultant. Professional and Outside services are frequently purchased on an hourly basis. It is, therefore, recommended that such services be budgeted on a per hour billing basis.

#### 4. TRAVEL

- a. Travel will include the cost of transporting staff and clients during the provision of contract services. The following allowable travel costs are included within this category:
  - i. Staff-owned vehicles: mileage reimbursement;
  - ii. Provider agency-owned vehicles: operating expenses and depreciation;
  - iii. Sub-contracted travel services;
  - iv. Rented vehicles:
  - v. Government motor pool vehicles:
  - vi. Public transportation; and
  - vii. Per diem.

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### **BUDGET DEVELOPMENT GUIDELINES & WORKSHEET**

#### b. Staff-Owned Vehicles

i. The travel cost of a vehicle owned by a Provider employee should be budgeted no greater than the applicant's designated mileage reimbursement rate. In public Provider agencies, the mileage rate is determined by the branch of government with which the Provider agency is affiliated. Public Provider agencies may budget up to the maximum rate allowable in their city, county or municipality. The actual cost of tolls and parking fees may be budgeted for employees using their vehicles for contract services.

#### c. Provider Agency-Owned Vehicles

- i. Travel costs for vehicles owned by a Provider agency must be budgeted on an actual cost method. Actual costs will include fuel, maintenance and repair, insurance, registration fees, tolls, parking fees and depreciation.
- ii. There are two methods to budget motor vehicles with regard to acquisition cost:
  - The vehicle may be purchased with Provider agency funds. The cost will be depreciated over the
    useful life of the vehicle. The current year depreciation expense is listed in the Travel Category of
    the Service Budget.
  - 2. The agency may budget the entire acquisition cost as a first year expense under the Equipment Category.

#### d. Rented Vehicles

If either a public or private Provider agency is renting vehicles from a private rental agency, the actual rental cost plus fuel (unless fuel is included in the rental cost) should be used to budget the cost. Rental costs will be considered reasonable depending on the type and degree of use and current fair market value of the model of vehicle. If a vehicle has been rented by the Provider until its acquisition cost has been reduced to below \$5,000, it may be purchased and budgeted as a current cost.

#### e. Motor Pool Vehicles

Provider agencies using vehicles supplied by a county or municipal motor pool may budget for travel by using the rate fixed by the motor pool.

### f. Public Transportation

In cases in which public transportation is used for authorized travel by employees or clients of the Provider, the actual cost of fares required should be estimated. Fare or any other expenses for staff members to commute to and from work are not an allowable cost.

### g. Per Diem

While Providers are encouraged to minimize the overnight travel costs, certain contract services may require occasional overnight travel on the part of employees. In such cases, per diem expenses should be budgeted no greater than the applicant's designated per diem reimbursement rate. For public Provider agencies, the per diem rate is determined by the branch of government with which the Provider is affiliated. Public Provider agencies may budget up to the maximum rate allowable in their city, county or municipality.

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#### **BUDGET DEVELOPMENT GUIDELINES & WORKSHEET**

#### 5. OCCUPANCY

a. Occupancy costs include occupancy services. Costs related to space needed for the delivery of contract services are allowable expenses. Space costs include the expense of a facility and other expenses directly related to the operation of the facility. Space Costs, however, do not include the purchase or major modification of land or facilities.

#### 6. OTHER OPERATING

- a. Other Operating costs include materials and supplies and general operating services.
- b. The costs of materials and supplies, necessary for the delivery of contract services, are allowable budgeted expenses. Such costs should be calculated by deducting from the purchase price, all cash and trade discounts, rebates, and allowances to be received by the Provider agency.

#### c. <u>Program Supplies</u>

Program supplies include consumable supplies used directly in the provision of contract services.

#### i. Materials

- (1) Materials are consumable supplies used directly by the clients in the provision of contract services. Material supplies will include but need not be limited to:
- (2) Arts and Crafts:
- (3) Housekeeping Goods (dishes, linens, etc.);
- (4) Client Activities Costs;
- (5) Toys; and
- (6) Literature.

#### d. Office Supplies

#### i. General Office Supplies

Office supplies are consumable supplies necessary to efficient administrative and service operations of the service program. The cost of this item may be budgeted by using a reasonable base cost per employee for the contract term multiplied by the total number of employees needing office supplies. Justification of the base cost must be available upon request.

# ii. Equipment

Any piece of equipment with an acquisition cost of up to \$4,999. 99 will be budgeted under the Other Operating Category. Budgeting of such pieces of equipment will be done on an actual cost basis. All Pieces of equipment with an acquisition cost of \$5,000 or more should be budgeted under the Capital Outlay Category.

#### iii. Postage

Postage may be budgeted by applying a monthly base to the total number of months in the contract. When applicable, Provider agencies should apply for and utilize special bulk mail rates.

### iv. Reproduction and Printing

The cost of printing and reproduction services, necessary for the performance of the contract, including but not limited to forms, reports, manuals and informational literature is allowable. However, if a cost for the rental of a photocopier has been budgeted, care must be taken to avoid duplication of costs. When budgeting for reproduction and printing services, enter a reasonable estimate of actual costs.

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#### **BUDGET DEVELOPMENT GUIDELINES & WORKSHEET**

#### e. Maintenance of Space

This item includes costs necessary for the upkeep of the Provider's facilities which neither add to the permanent value of these facilities nor appreciably prolong their intended life, but keep them in an efficient operating condition. This includes estimates of the actual costs of material needed for the maintenance and repair of the Provider's facilities or for sub-contracted maintenance services.

#### f. General Operating

- Central Services: Service costs such as administrative, data processing, payroll, supply and duplicating facilities on which the expense can be calculated and segregated as a direct cost are to be entered in this item. Support these budgeted expenses by indicating the basis of the cost.
- ii. Communication: Telephone and answering service costs, as well as telephone directory listings, which assist the client to identify and contact the Provider agency for contract services, will be permitted.
- iii. Bonding: Premiums for bonding costs will arise when there is a need to protect the provider agency and government against financial loss. Bonding practices beyond those which the Provider agency should normally use as good business practice will not be required. The most common bonding classification is that of a fidelity bond sufficient to cover the potential loss of accessible funds.
- iv. Advertising: To acquire quality goods or services at a low cost; to recruit potential employee; or to inform the public of the availability of services.
- v. Training: Provider agency employees are eligible for training directly related to the contract services. The necessary and appropriate expense related to training activities is to be included in this line item. The basis for this budgeted expense must be documented is the Proposal Itemized Service Budget, and a detailed description of the training activities must be rendered in the Program/Administration Section.
- vi. Trade, Business, Technical and Professional Activities: A series of costs may be encountered which assist in providing reference background, updating employees' knowledge and maintaining liaison or contact with similar activities. Expenses in this line item will be allowable when the costs are proven to be of direct benefit to the contract services. The following types of costs may be part of this item's budget expense:
  - (1) Library purchases and fees;
  - (2) Subscriptions professional literature;
  - (3) Membership dues; and
  - (4) Professional activities, clubs and meetings.
- vii. General Liability Insurance: Insurance costs are those insurance costs which the Provider is required to carry, or which are approved under the terms of the contract and any other insurance which the Provider maintains in connection with the general conduct of its business (excluding insurance on the building and contents which should be listed as a line item under Other Space Costs in the Space Category). The Provider can ascertain from the Department what types and amount of insurance coverage should be purchased.

### 7. CAPITAL OUTLAY (EQUIPMENT)

- a. The cost of equipment essential to the delivery of contract services and the maintenance of that equipment is allowable as a budgeted expense. Equipment which materially increases the value or useful life of a facility is unallowable.
- b. The Equipment Category, which includes office and program equipment, has been subdivided into two sections: (1) Equipment Costs, and (2) Equipment Maintenance Costs. (Provider agencies should note that vehicle-operating expenses are to be budgeted within the Travel Category.)

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# **BUDGET DEVELOPMENT GUIDELINES & WORKSHEET**

#### c. <u>Capital Equipment Costs</u>

Capital equipment costs may be budgeted through one of the following four methods:

- 1. Purchase:
- 2. Rental/Lease;
- 3. Depreciation; and
- 4. Use Allowance.

#### d. Equipment Maintenance Costs

- To keep equipment at an efficient operating level, various maintenance services may be necessary.
- ii. Maintenance services provided by vendors either under a services subcontract or as random repairs will be budgeted under this sections. Care must be used that costs of maintenance services call do not duplicate maintenance fees provided for in rental agreements. Maintenance costs must be calculated in proportion to the use of the item by the Provider agency in the delivery of contract services.

#### 8. OTHER

a. Indirect costs - Indirect costs are those incurred for a common or joint purpose benefiting more than one cost objective or activity and not readily assignable to the cost objectives specifically benefited, without effort disproportionate to the results achieved. Indirect costs are subject to approval by ADHS.

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# **BUDGET DEVELOPMENT GUIDELINES & WORKSHEET**

Itemized Service Budget

Rersonnel (use additional pages, if necess)	sarv)	Total Salary
FTE % Position/Title	Name of Employee	for % Allocated
	· ·	\$
		Ψ
TOTAL		•
TOTAL  2. Employee Related Expenses		\$
Item	Basis	
FICA		\$
Unemployment Insurance		\$
Worker's Compensation		\$
Retirement		\$
Life Insurance		\$
Health Insurance		
	TOTAL	\$
3. Professional and Outside Services		
Item	Basis	
		\$
	TOTAL	\$
4. Travel Expenses		
Item	Basis	
		\$
	TOTAL	\$
F. Oscupanov Evnances		
5. Occupancy Expenses Item	Basis TOTAL	\$
6. Other Operating		
Item	Basis	
		\$
	TOTAL	\$
7 Canital Outlan Furcasa	TOTAL	Ψ
7. <u>Capital Outlay Expenses</u> Item	Basis	
		¢
		\$
	TOTAL	\$
8. Other		
Item	Basis	
	GRAND TOTAL	\$

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# **IMPLEMENTATION PLAN**

TASK	PERSON RESPONSIBLE	VERIFICATION	START DATE	END DATE

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# ARIZONA PROGRAM DESIGN AND EVALUATION LOGIC MODEL

LINK \_\_\_\_

Needs/Resources	Goals & Objectives	Strategies / Approaches	Implementation Plan	Evaluation

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# APPLICANT'S PAST OR OTHER RELATIVE EXPERIENCE

# Applicant shall submit two (2) completed and signed forms as part of its Application.

Applicants are required to submit information about PAST experience to verify program performance using this form. Insert the information as requested. Responses shall include the details of at least three individual contracts for services related to those described in this RFGA.

Reference Contract Title:			_
Contract Term / Dates of Work	through	Geographic Area Served	
Target Population Served			
Narrative (Shall include the results (outco of past contracts the Applicant has had wi			nd the NUMBER
Reference: Company:			
Contact Name and Title:			

Telephone: \_\_\_\_\_ Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_

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# **KEY PERSONNEL**

<u>INSTRUCTIONS</u>: List all key personnel by name, position and/or title, responsibilities and percent of time assigned to this Grant.

Name	Position/Title	Responsibilities	% Time Assigned to Grant

**Note:** Applicant shall attach a resume for each of the key personnel proposed.

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# LIST OF OTHER FUNDING SOURCES

Please list all other funding that your organization currently receives from State or Public Agencies, Federal Agencies, Non-Profit Organizations, or any other source that may be utilized to also support the proposed project. Also list all funding received by your agency that is utilized to provide related services. Use a continuation sheet if necessary.

Type of Funding (Federal, State, local, other)	Received From	Amount	Term of Funding (Effective date/Ending date)
TOTAL:			

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### **Other Resources**

- 1. United States Department of Health and Human Services (DHHS) www.4parents.gov
- 2. The National Campaign to Prevent Teen Pregnancy (NCPTP) www.teenpregnancy.org
- 3. Annie B. Casey Foundation <a href="www.aecf.oprg">www.aecf.oprg</a>
- 4. Kaiser Family Foundation www.talkingwithkids.org
- 5. Advocates for Youth www.advocatesforyouth.org
- 6. National Education Association www.nea.org

# **Check List for Educational Materials**

Curricula Requirements/Recommendations	Source of Documentation (i.e. training outline, unit number, meeting schedule)	Comments
Required		
Sectarian instruction, worship, prayer or proselytization is not provided		
Information and data presented is medically accurate and current		
*Note - if the above requirements are not met, curriculum may not pass the review		
Curriculum Development		
Documentation that multiple individuals with expertise in different areas such as communication skills, parenting styles, teen behavior and problem solving, basic discipline methods, teen brain development, sexuality education, and adult learning methods are involved in the curriculum development.  ETR		
Assess the relevant needs and assets of the targeted parents. Make the information in the curricula immediately applicable to the parents.  ETR		
Curricula have been demonstrated to be effective with similar populations and match the needs and resources of the community.  ETR		
Pilot tested some or all of the activities. ETR		

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Curricula Requirements/Recommendations	Source of Documentation (i.e. training outline, unit number, meeting schedule)	Comments
Designed activities consistent with community values and available resources <b>ETR</b>		
In developing a new curricula lessons incorporate characteristics of effective curricula.  ETR		
Curricula, activities, and messages are appropriate to the cultural values of the parents, is language appropriate, and at an appropriate literacy level.		
Based on best or promising strategies		
Based on theoretical approaches that have been demonstrated to enhance adult learning.		
Curriculum Implementation		
Employs teaching methods designed to involve participants and personalize information. Allows participants an opportunity to practice what they have learned.		
Implement needed activities to recruit and retain parents.		
Allow for parent experiences to be shared and for feedback to be given.		
Select instructors that can relate to the parent population and ensure that they have the proper training to implement the curricula.		
Involves Fathers Nat'l Campaign		
Creates a safe environment to participate. ETR		

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Curricula Requirements/Recommendations	Source of Documentation (i.e. training outline, unit number, meeting schedule)	Comments
Curriculum Content		
Lessons include topics such as: sexuality, relationships, love and commitment, delaying sexual initiation, intimacy, safe sex, sexual coercion, dating violence, abstinence, contraception, emergency contraception.  Advocates for Youth		
Teaches communication skills such as: listening, avoiding assumptions, taking advantage of teachable moments, respecting others views, answering simply, directly and factually Advocates for Youth		
Informs parents of the roles they play: parent, adult role model, advocate, trainer.  National Campaign		
Helps participant clarify their own attitudes and values regarding sex, love, and healthy relationships with others  National Campaign		
Lessons provide information and activities related to the risk and protective factors. <b>ETR</b>		
Provides info on AZ law pertaining to financial responsibilities of parenting/sex conduct with minor.  ARS 15-711 and ASBR-R7-2-303		
Provides instruction on teaching youth how to say "no" to risky behaviors		
Provide education on STDs and the severe consequences and how to reduce those risks. <b>RFGA</b>		
Provide information on growth and development of children and adolescents. <b>RFGA</b>		
Provide information on developing parent/child communication skills. <b>RFGA</b>		
Includes information that addresses social pressures that influence youth		

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# **IMPLEMENTATION PLAN**

# The following is provided as an $\underline{\text{EXAMPLE ONLY}}$

TASK	PERSON RESPONSIBLE	VERIFICATION	START DATE	END DATE
Hire program Staff	Project Coordinator	Signed letter of Employment	October 1, 2007	November 1, 2007
Conduct/attend curriculum training	Staff	Training Certificate	November 1, 2007	December 1, 2007
Obtain approval for locations for trainings	Project Coordinator	Letter of approval	December 1, 2007	December 31, 2007
Book classes for parents	Project Coordinator	List of confirmed Agencies and Schedule	December 1, 2007	January 31, 2008

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# FORM A - UNDUPLICATED COUNT OF CLIENTS SERVED

Grant Number	Fiscal Year	Grantee Name	
Unduplicated Count of Clients Served Strategy A	Unduplicated Count of Clie	nts Served Strategy B	Unduplicated Count of Clients Served Strategy C

Indicate below the number of all clients served by gender and ethnicity by month,

Ethnicity and	Number of Clients Served by Gender and Ethnicity by month																	
Gender	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct					O*	T*
FEMALES																		
Black																		
Hispanic																		
Native American																		
Non-Hispanic White																		
Others																		
MALES	ı	I	ı	J	ı				ı		J				ı	I.		
Black																		
Hispanic																		
Native American																		
Non-Hispanic White																		
Others																		
TOTAL																		

 $<sup>\</sup>mathbf{O}$  = Other recipients of services or training such as mentors or youth etc.;  $\mathbf{T}$  = Total for row

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# FORM B—PROGRAM COMPLETION DATA

Grant Number	F	Fiscal Year					
Grantee Name		,					
	Number of	Number of Clients that complete at least 75% of the program					
Type of Program	Program Hours Provided	Ni	Number of Clients Served				
	TTOVIGEG			Other			
Curricula Based Education (Example)							
Training of Trainers (Example)							
Community Workshop/Conference (Example)							

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# FORM C—COMMUNITIES SERVED

Grant Numl	per	Fiscal Year	
Grantee Na	me		
State	County	City/T	own

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This is a multi-purpose form for use by agencies who have a Negotiated Service Contract with the Arizona Department of Health Services. It should be filled out, signed by an authorized person and mailed to the Department not later than the 15<sup>th</sup> day of the month following the expenditure period or in accordance with the contract. Later submission will delay the allotment of contract funds for the following month.

1.	Contract	Number								
2.	Contractor's Name									
3.	Title of	program								
4.	Reportir	g Period Covered: From To								
	A.	Check appropriate box:								
		☐ Cost Reimbursement – Cumulative Actual expenditures from the beginning of the Contract Period.								
		☐ Fixed Price – reimbursement type contract.								
	B.	Check appropriate box.								
5.	Detailed	statement of expenditures (Cost Reimbursement)								
	ITEM a.	Approved budget indicates the total budget for the current contract term. The Line Item Budget per the contract price sheet must be shown.								
	ITEM b	Prior Report Period Year to Date Expenditures are taken from Column D (Total Year to Date Expenditures) of the CER for the prior reporting period.								
	ITEM c.	Current Reporting Period Expenditures are accumulated expenses incurred from the beginning of the Reporting Period Covered, broken down by line item.								
	ITEM d	. Total Year to Date Expenditures = Column B (Prior Report Period Year to Date Expenditures) plus Column C (Current Reporting Period Expenditures).								
6.	Detailed	Statement of Fixed Price Contracts								
	A.	Type of Unit – From unit description/deliverable on price sheet.								
	ITEM 1	Rate per Unit from contract price sheet.								
	ITEM 2	Number of Units Provided for the current Reporting Period.								
	ITEM 3	Item (1) times Item (2) = Total Funds Earned this Reporting Period.								
		Prior Report Period Year to Date Funds Earned are taken from Column 5 (Total Year to Date Funds of the CER for the prior reporting period.								

ITEM 5. Item (3) plus Item (4) = Total Year to Date Funds Earned.

7. Contractor Certification: it is the responsibility of the Chief Executive Officer of the reporting agency to insure valid representation of the agency's expenditures or units reported on Fixed Rate Contracts. Once satisfied, the Chief Executive Officer must sign and date the report. Only an original signature will be accepted.

For Processing, mail or forward to: the Arizona Department of Health Services, OWCH 150 N. 18<sup>th</sup> Ave Suite 320, Phoenix, Arizona 85007.

CONTRACTOR'S EXPENDITURE REPORT	
EXHIBIT 6	
RFGA No. HR861037	

Arizona Department of Health Services Accounting/Contracts		XPENDITURE REPORT	P.O.#			☑ Cost Reimbursement - umulative Actual Expenditures
1740 W. Adams Street						Fixed Price
Phoenix, Arizona 85007					4B.	□Periodic Report
Invoice #	4. Reporting Period	Covered: From	To			□FINAL REPORT
5. COST REIMBURSEMENT	Contractor's D	etailed Statement of Exp	enditures and Fixed Prior Report Period Y		rent Reporting Period	Total Year to Date
(Actual Expenditures) A. Account Classification:		Approved Budget ( a )	Date Expenditure		Expenditures (c)	Expenditures (d)
Personal Services and ERE		\$	\$	- \$	-	\$ -
Professional and Outside Services		\$ -	\$	- \$	-	\$ -
Travel Expenses		\$ -	\$	- \$	-	\$ -
Other Operating Expense		\$	\$	- \$	-	\$ -
Capital Outlay Expense		\$	\$	- \$	-	\$ -
Other		\$ -	\$	- \$	=	\$ -
Total		\$ -	\$	- \$	-	\$ -
6. FIXED PRICE	Rate per Unit	Number of Units Provided this Reporting Period	Total Funds Earned Reporting Period		Report Period Year to ate Funds Earned	Total Year to Date Funds Earned
A. Type of Unit:	(1)	(2)	(3)		(4)	(5)
TOTAL						
ADHS USE ONLY	THIS SEC	TION FOR ADHS ACCOUNT	TING USE ONLY	7. CO	NTRACTOR CERTIFICAT	IO N
	Total Expenditures or total	al Fixed Price			fy that this report has be est of my knowledge and	en examined by me, and to
ADHS PROGRAM COORDINATOR CERTIFICATION:	Adj (if required):			e x p e n	ditures and fixed price i	nformation is valid, based
Performance satisfactory for payment	Less: Year to date payme	ents			our official accounting r stent with the terms of tl	ecords (book of account) and ne contract. It is also
Performance unsatisfactory, withhold payment	Adj (if required):					oayments are calculated by rices based upon information
No payment due	Net payment due:				ded in this report.	1000 basea apon miormation
	Index	P C A	Y Amount			
PROGRAM COORDINATOR SIGNATURE/DATE				AUTH	ORIZED CONTRACTOR'	S SIGNATURE/TITLE/DATE

ADHS/BFS/F-110 (Rev. 3/2002)

WHITE-ADHS ACCOUNTING PINK-ADHS ACCOUNTING COPY \* CANARY-ADHS PROGRAM COPY \* GOLDENROD-CONTRACTOR'S COPY